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Cooling technique improves odds of survival in cardiac arrests

By ALAN CHOATE
LAS VEGAS REVIEW-JOURNAL

Two Las Vegas Fire Department programs are starting to show results -- which in this case means more people surviving cardiac arrests.

"It's reassuring. It's a trend in the right direction," said Dr. David Slattery, the Fire Department's medical director. And the department barely had to spend any money to start the changes.

Since August 2008, the department has recorded a 19 percent survival rate among a certain kind of cardiac arrest patient. In many places across the country, that rate is in the single digits. For the past 90 days, Las Vegas' survival rate is 40 percent -- four out of 10 patients.

The rate began climbing steadily in November, according to department records, which is when the city adopted an "induced hypothermia" treatment. Responders use ice packs and an iced-down IV to lower a patient's body temperature to about 92 degrees, a temperature that is maintained for about 24 hours in the hospital.

Research has shown the approach improves odds of survival, according to the American Heart Association. It also gives the patient a better chance of being "neurologically intact" as the brain can be affected by the lack of blood reaching it during a cardiac event.

All that was needed were coolers so that IV bags can be iced down, Slattery said. The department was going to install refrigerators in ambulances but discovered that the units drained the battery.

Also, the city has participated in CARES, Cardiac Arrest Registry to Enhance Survival, since 2008. It's a computerized tracking system that documents a cardiac patient's progress from the time an ambulance is called to the hospital and records whether the patient lived or died.

It was developed by the Centers for Disease Control and Prevention and Emory University and doesn't cost the city any money.

The program serves as a performance measure for EMS departments as the medical care cardiac patients get from first responders plays a key role in their chances of survival.

The system focuses on a subset of cardiac arrest patients: those who get help quickly after the attack starts and have circulation restored. The patients must have suffered what is called "ventricular fibrillation," in which the heart is quivering but not pumping blood, said Dr. Sean Ameli, a Las Vegas cardiologist.

It's different from a heart attack, which occurs when arteries supplying blood to the heart are blocked.

Getting the heart pumping is critical: "CPR trumps everything else," Slattery said. "Nothing else is more important."

But the patient isn't out of the woods once circulation is restored.

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Cooling the body has been shown to be effective, although "there isn't a very large body of data ... that can totally beyond any question confirm that this is a standardized treatment," Ameli said. Its use by EMS crews will add to that data.

From August of 2008 to mid-April, 64 cardiac arrest patients met the required criteria. Twelve survived, and 11 of those were neurologically intact.

Clark County plans to join CARES and introduce body cooling to its crews in the next three months, and Henderson has added the cooling to its services.

The CARES website lists 27 communities using the program, including Reno, Denver, Colorado Springs, Colo., and San Francisco.

Contact reporter Alan Choate at achoate@reviewjournal.com or 702-229-6435.

Find this article at:

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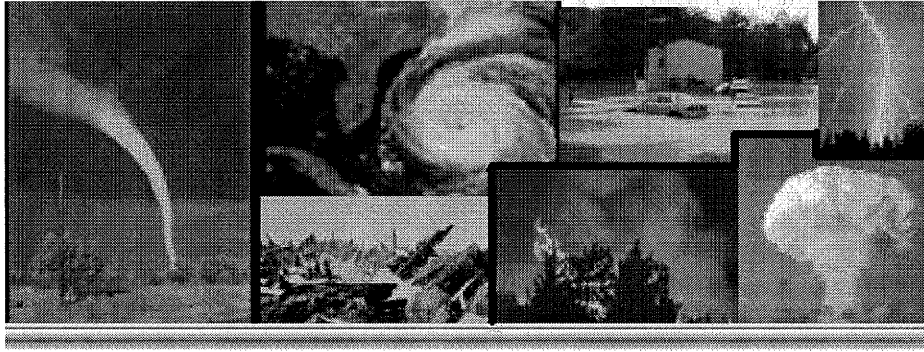
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May 28th, 2010 posted by Paul Rega, MD, FACEP May 28, 2010 @ 4:50 am

Las Vegas: Induced hypothermia making a difference

EMS

05/26/2010

Cooling method helps boost Las Vegas patient survival rates EMS crews have raised cardiac arrest patients' survival rates to four out of 10 patients over a 90 day period

By Alan Choate
The Las Vegas Review-Journal

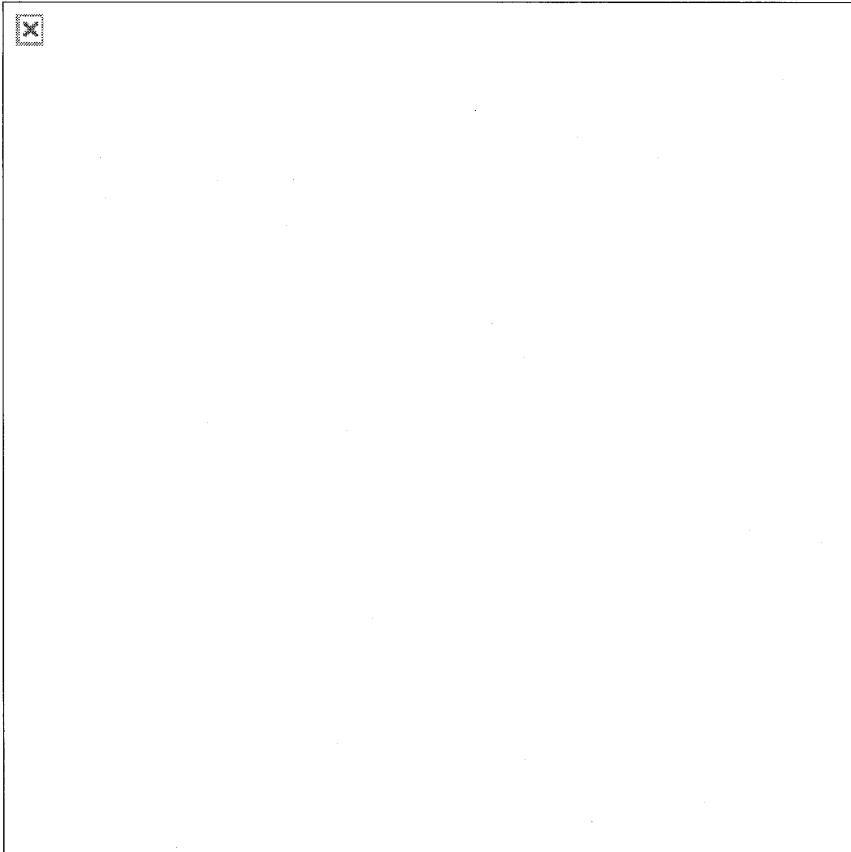
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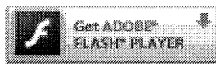
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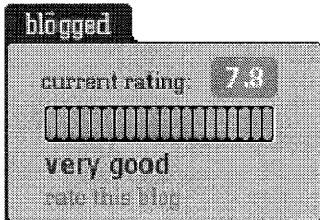


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EXHIBIT 4

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-APPLICATION-

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